

63-504

Application and Operational Procedures

63-504.1 Disaster CalFresh Application Form

The [DFA 385](#) "Application for Disaster CalFresh" form shall be used to record an application for Disaster CalFresh.

The head of household, spouse or any responsible member of the household may complete the application. The household may designate an authorized representative to act on their behalf in accordance with [63-113](#).

63-504.2 Disaster CalFresh Application

Disaster CalFresh applicants shall complete a Disaster CalFresh application ([DFA 385](#)) either in person at the LAC, Family Resource Centers (FRCs) or they may apply online at <https://www.MybenefitsCalWin.org/>. All Disaster CalFresh applicants including online applicants must be interviewed in person. The interview will take place at the LAC or FRC.

FRCs and LAC sites can accept and process applications without regard for residency in the county as long as the affected household was living in the disaster zip code at the time of the disaster.

63-504.3 Applying at Another Family Resource Center (FRC)

Households applying for Disaster CalFresh and/or CalFresh replacement benefits at any FRC will have their application processed and benefits issued, if otherwise eligible, at that FRC even if the household has an ongoing CalWORKs, CalFresh and/or Medi-Cal case at another FRC.

The front desk shall be set up to include an express line to process applicants who have submitted a Disaster CalFresh application online.

For additional information and instructions, refer to [63-501.9, County of San Diego Disaster CalFresh Plan](#).

63-504.4 Applying at a Local Assistance Center (LAC)

Households applying for Disaster CalFresh and/or CalFresh replacement benefits at a LAC, will have their application processed and benefits issued, if otherwise eligible, at that LAC even if the household is already receiving CalWORKs, CalFresh and/or Medi-Cal benefits.

An express line shall be set up to greet applicants who completed the

Disaster CalFresh application online.

For additional information and instructions, refer to [63-501.9, County of San Diego Disaster CalFresh Plan](#).

**63-504.5
Applying
Online**

Households applying for Disaster CalFresh online at <https://www.MybenefitsCalWIN.org/> will be instructed when filing the application to go to the nearest FRC or LAC to be interviewed.

For additional information and instructions, refer to [63-501.9, County of San Diego Disaster CalFresh Plan](#).

**63-504.6
Operation of
Disaster
CalFresh
During
Pandemic
Conditions**

During a human pandemic the Disaster CalFresh application procedures have to change considerably as the conditions during a pandemic are unlike any other disaster. The County will not be able to process Disaster CalFresh applications at FRCs or LAC sites due to restrictions on social gathering and will need to accommodate a greatly increased workload with up to 40 percent of staff absent from work.

To streamline certification and issuance during a human pandemic (including a pandemic flu), FNS may make the following policy flexibilities available when implementing Disaster CalFresh:

- Waive face-to-face interviews altogether for all applicant households.
 - Allow clients to submit Disaster CalFresh applications by internet or mail.
 - Allow households to initiate and secure a filing date for their Disaster CalFresh application with a telephone interview. In this case, the household would need to later submit a signed application to avoid denial.
 - Reduce or eliminate verification of items that are not mandatory (only verification of identity is mandatory for the Disaster CalFresh).
 - Use standard one-month Disaster CalFresh certification periods and extend as needed if pandemic conditions and/or social distancing continue.
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63-504.7

All regulations governing the use of an authorized representative (AR)

**Authorized
Representative (AR)
Requests**

for CalFresh apply to Disaster CalFresh including:

- The AR designation must be made in writing by the head of household, the spouse, or another responsible member of the household.

The requestor can complete CalWIN form CSF 14 or manual form 09-22 HHSA, but a sworn statement or affidavit can replace either form.

- The worker must verify the identity of the AR and the applicant.

**63-504.8
Replacement
of Food**

CalFresh recipients whose food purchased with CalFresh benefits is destroyed during a disaster or spoiled/damaged because of a “household misfortune” such as a power outage, flood, etc., may be eligible for a replacement of the food loss, up to a maximum of one month’s CalFresh allotment.

- Replacement benefits shall be issued under the CalFresh Program and must be recorded as such in the daily report (log) during a disaster. Replacements will not be reported as Disaster CalFresh payments in the FNS-292 fiscal report to FNS.
- CalFresh recipients must complete the “Replacement Affidavit/Authorization” form [DFA 303](#) and “Affidavit of Loss” form [09-93 HHSA](#) to request replacement of food destroyed due to the disaster, spoiled or damaged during a “household misfortune.”
- Replacement benefits must be issued within 10-days of request or if requesting Expedited Services, within the three days Expedited Services time frames.
- The household must be notified in writing of the approval/denial of the request for replacement of food via a manual notice of action [09-90 HHSA](#):

The [09-90 HHSA](#) informs the household of its right to a state hearing to contest the denial or delay of a replacement issuance or authorization. Replacements will not be made while the denial or delay is being appealed.

NOTE: Ongoing CalFresh households receiving replacement benefits cannot receive a full Disaster CalFresh benefit. Households that have received replacements can apply and be issued a Disaster CalFresh **supplement** to raise the benefit to the maximum allotment. (63-504.10)

**63-504.9
Replacement
of Food and
EBT Card
Form**

The worker will have the client complete the "Replacement Affidavit/Authorization" form [DFA 303](#) to process the replacement of an Electronic Benefit Transfer (EBT) card or to apply for a replacement of food lost during the disaster.

**63-504.10
Disaster
CalFresh
Supplements**

CalFresh recipients that received a regular monthly CalFresh allotment may request a Disaster CalFresh supplement to receive the same maximum benefit as new households applying for Disaster CalFresh.

A supplement is the difference between the household's normal monthly CalFresh allotment and the applicable maximum monthly allotment for the household size that might include a household member not eligible to regular CalFresh (e.g., ineligible noncitizen, ineligible student, etc.)

To apply for Disaster CalFresh supplements the household will complete the application for emergency CalFresh assistance form [DFA 385](#).

EXAMPLE 1: One-person household's regular monthly allotment was \$82. Since the maximum monthly allotment allowed is \$194, the Disaster CalFresh supplement (NSDI code **SDFSP**) would be $\$194 - \$82 = \$112$.

EXAMPLE 2: A CalFresh household consisting of three CalFresh recipients and two ineligible noncitizens received a regular CalFresh allotment of \$280. The household requests and receives replacement CalFresh of \$150, which was the amount of food spoiled during the disaster due to a power outage. They also requested Disaster CalFresh for five persons (including two ineligible noncitizens). Since the household already received \$280 in regular CalFresh, the household will be eligible to only $\$771 - \$280 = \$491$ of Disaster CalFresh supplement benefits (NSDI code **SDFSP**).

**63-504.11
Recording
the Disaster
CalFresh
Application
in CalWIN**

If CalWIN is available during a disaster, the Disaster CalFresh applications should be recorded directly into CalWIN. However, since CalWIN may not be available during a disaster, workers will have to record the Disaster CalFresh application in both **Data Collection** and **Benefit Issuance** after Disaster CalFresh benefits have already been issued to the client.

**63-504.12
Summary of
Disaster
CalFresh
and
Replacement
Forms and
Notices**

Below is a list of manual forms needed for Disaster CalFresh and replacement of food applications:

Disaster CalFresh Application Forms and Notices	
DFA 385	"Application for Disaster CalFresh Assistance"
DFA 390	Notice of Approval/Denial for Disaster CalFresh
09-93 HHSA 09-93 HHSA (Spanish)	Affidavit of Loss*
Replacement of Food Application Forms and Notices	
DFA 303	"Replacement Affidavit/Authorization"
09-90 HHSA 09-90 HHSA (Spanish)	Replacement of Food Approval/Denial Notice
Disaster CalFresh Reporting Logs	
09-88 HHSA	Disaster Relief Daily Log
16-92 HHSA	Disaster CalFresh Benefits Issuance Request & Case Checklist
San Diego County Disaster CalFresh Report	

* The Affidavit of Loss form [09-93 HHSA](#) must be completed during a disaster if loss of food is the only adverse effect claimed by a Disaster CalFresh applicant. ([63-506](#))
